PTO/SB/22 (09-06)
Approved for use through 03/31/2007. OMB 0651-0031
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(Fees pursuant to	XTENSION OF TIME UNDER FY 2006 the Consolidated Appropriations Act	lection of information unless if displays a valid OMB control Docket Number (Optional) 05986/100K433-US2			
pplication Numbe	r 10/666,423	3	Filed S	eptember 19, 2003	
	C IMMUNOGENIC BUT NON-AM INDUCTION OF AN IMMUNE RE				
rt Unit 1647	,	Examiner	Examiner D. C. Gamett		
dentified application					
he requested exte	ension and fee are as follows (che	eck time period desi	red and enter the a	appropriate fee below):	
		<u>Fee</u>	Small Entity Fe		
	onth (37 CFR 1.17(a)(1))	\$120	\$60	\$	
Two m	onths (37 CFR 1.17(a)(2))	\$450	\$225	\$	
X Three	months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 510.00	
Four m	nonths (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
Five m	onths (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
X Applicant cla	aims small entity status. See 37	CFR 1.27.			
	he amount of the fee is enclosed.				
	credit card. Form PTO-2038 is a				
	r has already been authorized to		application to a De	oosit Account	
	r is hereby authorized to charge a count Number04-0100		be required, or cre osed a duplicate co		
I am the	applicant/inventor.				
	assignee of record of the enti Statement under 37 CFR			6).	
				- / ·	
x	attorney or agent of record. F	Registration Number	r <u>25,351</u>		
x	attorney or agent of record. F attorney or agent under 37 Cl Fegishation number if acting u	FR 1.34.	r25,351	·	
X	attorney or agent under 37 Cl Registration number if acting u	FR 1.34.		nber 21, 2006	
X	attorney or agent under 37 Cl Registration number if acting u	FR 1.34.	Noven	nber 21, 2006 Date	
	attorney or agent under 37 Cl Registration number if acting u	FR 1.34.	Noven	nber 21, 2006	

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PTO/SB/17 (07-06)
Approved for use through 01/31/2007. OMB 0651-0032

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	Complete if Known										
Effective on 12/08/ Fees pursuant to the Consolidated Approp		Application Numb	oer 1	0/666,423							
FEE TRANS	Filing Date September 1			, 2003							
	First Named Inve										
For FY 20	Examiner Name	Examiner Name D. C. Gamett									
X Applicant claims small entity stat	Art Unit	Art Unit 1647									
TOTAL AMOUNT OF PAYMENT	Attorney Docket N	Attorney Docket No. 05986/100K433-US2									
METHOD OF PAYMENT (check all that apply)											
X Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.											
For the above-identified depo	sit account, the Director	s hereby authorized	to: (check	all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17											
FEE CALCULATION		·-··	,			* ·					
1. BASIC FILING, SEARCH, AND E	XAMINATION FEES										
			EXAMINA	ATION FEES							
Application Type Fee (\$	Small Entity) Fee (\$) Fee (\$	Small Entity Shall Entity	Fee (\$)	Small Entity Fee (\$)	Fees I	Paid (\$)					
Utility 300	150 500		200	100		147					
Design 200	100 100	50	130	65							
Plant 200	100 300	150	160	80		_					
Reissue 300	150 500	250	600	300							
Provisional 200	100 0	0	0	0							
2. EXCESS CLAIM FEES						Small Entity					
Fee Description					Fee (\$)	<u>Fee (\$)</u>					
Each claim over 20 (including Reissi	•				50	25					
Each independent claim over 3 (inclu	uding Reissues)				200	100					
Multiple dependent claims	- A	D-1-1 (A)			360	180					
Total Claims 22 - 22 =		Paid (\$)		tiple Depende							
HP = highest number of total claims paid for,			<u>Fee</u>	<u>(a)</u> .	ee Paid (\$	u					
Indep. Claims Extra Claims	•	Paid (\$)				_					
3 -3=		(4)	,								
HP = highest number of independent claims	paid for, if greater than 3.										
3. APPLICATION SIZE FEE											
If the specification and drawings ex	ceed 100 sheets of paper	(excluding electron	ically file	d sequence or	computer	,					
listings under 37 CFR 1.52(e)), t sheets or fraction thereof. See 3			small ent	ity) for each ac	iditional 50	'					
Total Sheets Extra Sheets	, , , , , ,	additional 50 or fraction	on thereof	Fee (\$)	Fee I	Paid (\$)					
100 =		(round up to a whole		=======================================	=						
4. OTHER FEE(S)		•	,		Fees	Paid (\$)					
Non-English Specification, \$130) fee (no small entity disc	ount)									
Other (e.g., late filing surcharge):	2253 Extension for re	sponse within thir	d month		51	0.00					
SUBMITTED BY	_										
Signature J. J.	7	Registration No. (Attorney/Agent)	25,351	Telephone	(212) 52	7-7770					
		Date November 21, 2006									